



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

**\*BIBDATASHEET\***

Bib Data Sheet

CONFIRMATION NO. 3657

<b>SERIAL NUMBER</b> 10/761,726	<b>FILING OR 371(c) DATE</b> 01/21/2004 <b>RULE</b>	<b>CLASS</b> 601	<b>GROUP ART UNIT</b> 3764	<b>ATTORNEY DOCKET NO.</b> 4E09.1-020
------------------------------------	---	---------------------	-------------------------------	--

**APPLICANTS**

Yury M. Podrazhansky, Alpharetta, GA;  
 Mikhail N. Lyubich, Duluth, GA;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/449,149 02/24/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***  
**\*\* 04/24/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 52	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

MEHRMAN LAW OFFICE, PC  
 ONE PREMIER PLAZA  
 5605 GLENRIDGE DRIVE, STE 795 B  
 ATLANTA, GA 30342

**TITLE**

Method and apparatus for improving local blood and lymph circulation

<b>FILING FEE RECEIVED</b> 673	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---